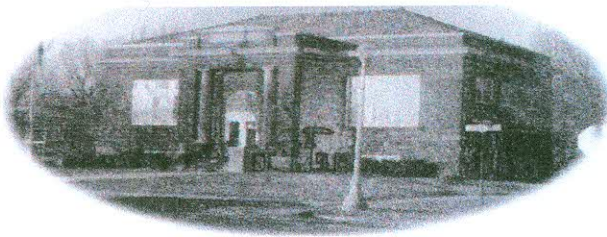


4th Annual



Auld Public Library

5K Run/Walk 7th Grade-Adult \$20

"Fund Run"..... 8:00 a.m. Race Time

Saturday, May 25th 2013

Red Cloud, Nebraska

Youth (K-6th) 1 Mile Run \$10

Mail Completed entry form along with check
or money order to:

AULD PUBLIC LIBRARY

Attn: Terri Eberly

537 N. Webster Street

Red Cloud, Nebraska 68970

RACE DAY REGISTRATION and T-SHIRT PICK-UP:

7:00 a.m.-7:45 a.m. Auld Public Library

** Proceeds and Donations go to the renovation of the Red Cloud Auld Public Library*

Name _____ Age _____
Address _____ City _____ State & Zip _____
Email Address _____
Telephone: _____
Male _____ Female _____ 5K _____

SHIRT SIZE: Adult S M L XL XXL COLOR
BLACK or TURQUOISE

Youth S M L /BLACK

*If not pre-registered, shirt availability may be limited on day of race.

Pre-Registration Forms Must Be Received By May 10th.

By indicating your acceptance, you understand, agree, warrant and covenant as follows:

YOU UNDERSTAND THAT PARTICIPATION IN THE EVENT IS POTENTIALLY HAZARDOUS, AND THAT A REGISTERED PARTY SHOULD NOT PARTICIPATE UNLESS THEY ARE MEDICALLY ABLE AND PROPERLY TRAINED. YOU UNDERSTAND THAT EVENTS MAY BE HELD OVER PUBLIC ROADS AND FACILITIES OPEN TO THE PUBLIC DURING THE EVENT AND UPON WHICH HAZARDS ARE TO BE EXPECTED. PARTICIPATION CARRIES WITH IT CERTAIN INHERENT RISKS THAT CANNOT BE ELIMINATED COMPLETELY RANGING FROM MINOR INJURIES TO CATASTROPHIC INJURIES, INCLUDING DEATH. YOU UNDERSTAND AND AGREE THAT IN CONSIDERATION OF BEING PERMITTED TO PARTICIPATE IN THE EVENT, YOU AND ANY REGISTERED PARTY, THE HEIRS, PERSONAL REPRESENTATIVES OR ASSIGNS OF YOU OR THE REGISTERED PARTY DO HEREBY RELEASE, WAIVE, DISCHARGE AND COVENANT NOT TO SUE ACTIVE FOR ANY AND ALL LIABILITY FROM ANY AND ALL CLAIMS ARISING FROM PARTICIPATION IN THE EVENT BY YOU OR ANY REGISTERED PARTY. YOU WAIVE, RELEASE AND HOLD HARMLESS THE CITY OF RED CLOUD, COUNTY OF WEBSTER, ANY OF ITS AGENTS, EMPLOYEES, OFFICERS, COUNCIL MEMBERS AND SPONSORS FOR ANY AND ALL RIGHTS, CLAIMS FOR DAMAGES OR COSTS IT MAY INCUR.

Print Name _____ Date _____

Signature _____
(If under the age of 18, a parent or guardian must sign on your behalf)

For Additional Information Contact: Terri Eberly 402-746-4784

This form can also be accessed thru Auld Public Library
www.libraries.ne.gov/redcloud